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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
BEFORE THE TRADEMARK TRIAL AND APPEAL BOARD

Proceeding	92052260
Party	Defendant Edgar Alexander Barrera
Correspondence Address	ALEXANDER BARRERA 10 CASTANIA CT ST AUGUSTINE, FL 32086 UNITED STATES axlellism@netbusiness.com
Submission	Other Motions/Papers
Filer's Name	Edgar Alexander Barrera
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Signature	/Edgar Alexander Barrera/
Date	10/06/2012
Attachments	He has who.tif (6 pages)(762010 bytes)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE
BEFORE THE TRADEMARK TRIAL AND APPEAL BOARD

STEPHEN A. WESTLAKE,)	
)	
Petitioner,)	Cancellation No. 92/052,260
)	(Serial No. 77/378,015)
)	
EDGAR ALEXANDER BARRERA)	
)	
Respondent.)	

**EMERGENCY MOTION FOR EXTENSION OF TIME AND
RENEWED REQUEST FOR STAY OF PROCEEDINGS**

My brother, Edgar Alexander Barrera, the Respondent in this matter. I am of his Respondent's Power of Attorney, need further extension of time due to the following:

I want to comply with helping him any possible way that I can during his brother's sickness.

It is impossible for me to file the Initial Disclosures within the time frame given to me.

I am giving a detailed report providing an explanation for me to obtain such information.

It is impossible for me to file the Initial Disclosures within the time frame given to me.

Lester A. Euell, is our godfather and member of our family, who has most of important material to help file the Initial Disclosures for the necessary information. But unfortunately he was hospitalized was have immediate quintuple heart bypass surgery on June 21, 2012 and cannot do anything that would further intensify his health problems as it would be extremely risky and could jeopardize his life and must avoid stress. He is present health status is life threatening at this particular time due to his serious quintuple heart bypass surgery.

Also he also had a severe Temporal Parietal Stroke of the "infarct left parietal occipital region" in the month of July 9, 2012. He is presently having help and assistance during his current healing process in getting over this stroke. This

is also taking him time to recuperate. He is continuously being treated at the Halifax Health Center.

Lester A. Euell, was the formerly owner of the Police Gazette and is also known being "the world's foremost authority on The Police Gazette".

The prognosis is that the convalescent period of time is needed therefore and the Respondent requests this be continued for additional sixty days so my godfather health is better and we can get the initial disclosures and finish to file.

My godfather cannot take this kind of stress right now and is trying to answer his health since it is very serious condition, and much avoid stress.

He has who can help us give me this important information: that Initial disclosures include: the name, address, and telephone number of each individual likely to have discoverable information that the disclosing party may use in support of its claims or defenses; a description by category and location of all documents, electronically stored information, and tangible things that are in possession, custody, or control of the party and that the disclosing party may use to support its claims or defenses.

From what I know, certain documents are located in several states primarily Florida, North Carolina and California in various locations. It requires me being able to take the necessary time to physically locate these documents and pertinent information as well as find out who his witnesses will be in this matter.

I'm physically in California and my brother is in Florida. The distance is 2,500 miles away. I will have to travel there in order to locate the pertinent documents and information.

I'm not familiar with this case. It will take me time to understand this and either retain counsel or file an answer directly by myself as my brother's power of attorney.

I haven't had the time to study the case and I need an adequate time to locate documents and it therefore puts me at massive disadvantage and creates a terrible hardship.

I need the proper time to study this order, in order to go forward properly and it is technically difficult and hard to comprehend. I am not an attorney. I just need some time so that justice can be served and I can move forward with this case in order to help my brother. I am also trying to find an attorney in the meantime, but I don't have access to my brother's records.

Respondent's Power of Attorney, under the circumstances, needs a further extension of time and respectfully pleas upon this Court to grant me this Motion and Request of not less than sixty days.

I also plea that the proceedings be suspended pending the disposition of my motion.

The interests of justice will be served if this continuance and suspension of the proceedings is granted.

WHEREFORE, Respondent's Power of Attorney respectfully seeks this Emergency Motion for an Extension of Time and Renewed Request for Stay of Proceedings based upon the foregoing reasons.

Certified and Respectfully submitted by:

Edgar Alexander Barrera
 Edgar Alexander Barrera, Respondent
 by Melissa Barrera, Power of Attorney
 22159 Ladera Street
 Grand Terrace, CA 92313

Telephone (909) 644-2799

CERTIFICATE OF SERVICE

I hereby certify that a copy of the foregoing instrument was placed in the United States Mail, postage prepaid, this 4th day of October, 2012, addressed to:

Mark Levy, 700 Security Mutual Bldg., 80 Exchange Street, Binghamton, NY 13902

and

Kevin Guyette, 19 Chenango St. #1101, Binghamton, NY 13901-2904

**HALIFAX HEALTH
DEPARTMENT OF RADIOLOGY**

303 N. Clyde Morris Boulevard, Daytona Beach, FL 32114
1041 Dunlawton Ave., Port Orange, FL 32129

RADIOLOGY CONSULTATION REPORT

Ordered By:	KARLA MCNISH MD	MR#:	H000068505	DOB:	10/18/1955
Attended By:	KARLA MCNISH, M.D.	Loc:	HRAD	Age:	56
Copy To:	KARLA MCNISH, M.D.	Bed:			

EUELL, LESTER ALAN

MRI BRAIN, W&W/O CONTRAST

*****Signed*****

EXAM DATE/TIME: 09/27/2012 14:00

INDICATIONS: Slurred speech.

TECHNIQUE: Multiplanar, multisequence MRI of the brain with and without contrast.

COMPARISON: CT brain 7/9/2012.

FINDINGS: High FLAIR abnormality is seen within the left posterior temporal/occipital lobe. There is also more prominent high FLAIR abnormality seen along the cortices. No restricted diffusion is seen. This is related to a chronic infarct. No midline shift or mass effect. There is slight susceptibility artifact seen along the cortex of the previous infarct. No definite acute hemorrhage seen. The ventricles are patent. The brain stem is intact. No significant enhancement. No masses are seen.

There is diffuse mucosal thickening seen.

Also within the area of previous infarct in the left posterior temporal region. There is a small focal punctate area of high FLAIR abnormality which also demonstrates some slight restricted diffusion and may be related to a small focal acute infarct.

***IMPRESSION: There is a chronic left posterior temporal/occipital infarct. Tiny focal punctate area of high FLAIR abnormality seen adjacent to the old infarct could be related to a small area of acute ischemia. Otherwise, no acute intracranial abnormality. There is some laminar necrosis of the previously identified left posterior temporal/occipital infarct. No midline shift or mass effect is noted.

Eric F. Tocci, MD
Board Certified Radiologist.
This report was verified electronically.

**HALIFAX HEALTH
DEPARTMENT OF RADIOLOGY**

303 N. Clyde Morris Boulevard, Daytona Beach, FL 32114
1041 Dunlawton Ave., Port Orange, FL 32129

RADIOLOGY CONSULTATION REPORT

Ordered By:	BRADLEY S. LITKE M.D.	MR#:	H000068505	DOB:	10/18/1955
Attended By:	DINESH ARAB, M.D.	Loc:	HCPC	Age:	56
Copy To:	KARLA MCNISH, M.D.	Bed:	456-A		
	KARLA MCNISH, M.D.				

EUELL, LESTER ALAN

US CAROTID ARTERIES, COMP BILAT

*****Signed*****

EXAM DATE/TIME: 06/20/2012 09:11

INDICATIONS: Dizziness.

COMPARISON: Carotid ultrasound 03/19/2010.

FINDINGS: Grayscale, color Doppler, and spectral analysis of the carotid arteries and vertebral arteries were performed.

RIGHT: Mild scattered noncalcified atherosclerotic plaque is seen involving the common carotid artery, carotid bulb, and proximal ICA. By grayscale analysis this generates less than 50% luminal narrowing of the proximal ICA. The peak systolic velocity of the mid common carotid artery is 87 cm/second and of the ICA 102 cm/second. The ICA/CCA ratio is 1.2. Peak systolic velocity of the external carotid artery is 118 cm/second. The ICA waveform on the right is normal.

LEFT: Scattered areas of calcified and noncalcified atherosclerotic plaque are seen involving the mid common carotid artery as well as the carotid bulb. No luminal narrowing is appreciated by grayscale analysis. The peak systolic velocity of the mid common carotid artery is 116 cm/second and of the ICA 72 cm/second. The ICA/CCA ratio is 0.6. Peak systolic velocity of the external carotid artery is 107 cm/second. The ICA waveform is normal.

VERTEBRAL ARTERIES: Antegrade flow is seen involving both vertebral arteries.

Elevated flow velocities and ICA/CCA ratios have been found to correlate with increased degrees of vessel stenosis, calculated as percentage of diameter relative to a normal segment of distal ICA.

***IMPRESSION: Scattered atherosclerotic plaque involving both carotid arteries without hemodynamically significant luminal narrowing being observed. Antegrade flow is seen involving both vertebral arteries.

Thomas Green Jr., MD
Board Certified Radiologist.

Accession #: 8779531001HFCH Order #: 0620-0006
Signed Report #: 0620-0101

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Written

**HALIFAX HEALTH
DEPARTMENT OF RADIOLOGY**

303 N. Clyde Morris Boulevard, Daytona Beach, FL 32114
1041 Dunlawton Ave., Port Orange, FL 32129

RADIOLOGY CONSULTATION REPORT

Ordered By:	BRADLEY S. LITKE M.D.	MR#:	H000068505	DOB:	10/18/1955
Attended By:	DINESH ARAB, M.D.	Loc:	HCIS	Age:	56
Copy To:	KARLA MCNISH, M.D.	Bed:	252-A		
	KARLA MCNISH, M.D.				

EUELL, LESTER ALAN

CHEST, PA & LAT

*****Signed*****

EXAM DATE/TIME: 06/20/2012 09:06

INDICATIONS: Pre-op for heart surgery.

COMPARISON: Chest x-ray 6/19/2012.

FINDINGS: The lungs are symmetrically aerated and clear. No focal parenchymal density is seen. The heart is normal in size and configuration. Bronchopulmonary markings are well-delineated.

***IMPRESSION: The lungs are clear.

Thomas J. Yuschok, MD
Board Certified Radiologist.
This report was verified electronically.